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MAY 14 2014

S.D. SEC. OF STATE

Secretary of State Office
500 E Capitol Ave
Pierre, SD 57501
(605)773-2797

**APPLICATION FOR
CERTIFICATE OF AUTHORIZATION TO
PROVIDE POSTSECONDARY EDUCATION**

Please mark the appropriate box:

☒ INITIAL APPLICATION

☐ CHANGE OF PRIMARY ADDRESS

☐ CHANGE OF NAME

☐ CHANGE IN ADDITIONAL SITES (ATTACHMENT A)

☐ CHANGE IN ACCREDITATION

☐ OTHER CHANGE(S)

1. Name of Applicant (*the institutional name under which postsecondary educational programs are provided*):

Georgia Highlands College

2. Applicant's Main Address (*Additional sites listed on Attachment A*):

3175 Cedartown Highway, SE

(Street Address)

Rome

(City)

Georgia

(State)

30161

(ZIP Code)

www.highlands.edu

(Website)

3. Contact Person:

Dr. Laura Musselwhite

(Name)

706-295-6327

(Telephone Number)

lmusselw@highlands.edu

(Email Address)

Interim VP, Academic Affairs

(Title)

706-204-2279

(Fax Number)

4. Does the Applicant operate at other sites than the address stated above?

☐ YES

☒ NO

If "YES", please be advised that Attachment A to this Application must be completed, which shall comprise part of this Application, and any subsequent changes to the information provided in Attachment A must be submitted with a revised Application to the Secretary of State Office, within thirty (30) days of such change.

5. Does the Applicant have a parent organization (*non-profit, corporate, or otherwise*)? ☒ YES ☐ NO

If "YES", please indicate the following:

The Board of Regents of the University System of Georgia

(Parent Organization Name)

270 Washington Street, SW

(Street Address)

Atlanta

(City)

Georgia

(State)

30334

(ZIP Code)

6. Is the Applicant an instrumentality of the State under the jurisdiction of the South Dakota Board of Regents?

☐ YES ☒ NO

If "NO", please indicate whether the Applicant is either (*check one of the following*):

☒ An instrumentality of another state (please list the state agency which has jurisdiction over Applicant)

State Georgia

Agency BOR of the University System of GA

Address 270 Washington Street, SW

City Atlanta

State GA

Zip Code 30334

Contact Phone Number 404-962-3050

Contact Website www.usg.edu

☐ Legally established to operate in South Dakota as a private business entity

South Dakota Corporate ID _____

South Dakota Corporate Name _____

☐ Legally established to operate in South Dakota as a not-for-profit corporation.

South Dakota Corporate ID _____

South Dakota Corporate Name _____

7. Is the Applicant accredited by an accrediting agency recognized by the United States Department of Education?

☒ YES

Accrediting Agency: Commission on Colleges of the Southern Association of Colleges and Schools

1866 Southern Lane

(Street Address)

Decatur

(City)

Georgia

(State)

30033-4097

(ZIP Code)


Effective date of most recent grant of accreditation: 2008
Term or expiration date of most recent accreditation: 2018

- ☐ NO Application submission must include documentation of an affiliation agreement whose terms make another postsecondary institution, which is accredited by an accrediting agency recognized by the United States Department of Education, responsible for awarding academic credit and educational credentials to its students and maintaining transcripts for such students:

The undersigned acknowledges that Applicant is required to notify the Secretary of State Office within thirty (30) days of a change in information set forth in this Application, including any changes in information set forth in any Attachments or other accompanying information. The undersigned has executed the foregoing document and, under penalties of perjury, certifies that the information provided herein, and in support thereof, is true and correct.

The application must be signed by an authorized officer of the postsecondary educational institution:

Dated 5/13/2014


(Signature of an authorized officer)

Dr. Laura Musselwhite
(Printed name)

Interim VP, Academic Affairs
(Title)

Submit Application to:
South Dakota Secretary of State
Corporations Division
500 East Capitol, Suite 204
Pierre, SD 57501

Or email us at:
SOS.EDU@state.sd.us

Exemptions

If the institution falls under one or more of the following categories, the institution is exempt from registering.

- Established by the government of the United States;
- Established by the government of an Indian tribe whose tribal lands are located, in whole or in part, in South Dakota;
- Established, owned, controlled, operated, and maintained by a religious organization lawfully operating as a nonprofit religious corporation and awarding only religious degrees or certificates for the purpose of conferring clerical status or authority within that religion; or
- Subject to the jurisdiction and regulations to the South Dakota Cosmetology Commission.

ATTACHMENT A

ADDITIONAL SITES AT WHICH APPLICANT OPERATES EDUCATIONAL PROGRAMS

(Must be accompanied by an Application for Certificate of Authorization to Provide Postsecondary Education)

1. n/a
(Name)

(Street Address)

(City) (State) (ZIP Code)
2. _____
(Name)

(Street Address)

(City) (State) (ZIP Code)
3. _____
(Name)

(Street Address)

(City) (State) (ZIP Code)
4. _____
(Name)

(Street Address)

(City) (State) (ZIP Code)

(Make additional copies of this Attachment as may be necessary and submit with Application)



SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS
COMMISSION ON COLLEGES

1866 Southern Lane • Decatur, Georgia 30033-4097

Telephone 404/679-4500 Fax 404/679-4558

www.sacscoc.org

July 10, 2008

Dr. J. Randy Pierce
President
Georgia Highlands College
3175 Cedartown Highway SE
Rome, GA 30161

Dear Dr. Pierce:

The following action regarding your institution was taken at the June 2008 meeting of the Commission on Colleges:

The Commission on Colleges reaffirmed accreditation and requested a First Monitoring Report due **April 14, 2009**, addressing the visiting committee's recommendation applicable to the following referenced standard of the *Principles*:

CS 3.3.1 (Institutional Effectiveness), Recommendation 1

The institution has not yet demonstrated compliance because it did not provide evidence of the assessments of *learning outcomes* for the cooperative Associate in Applied Science degree program with Coosa Valley Technical College and North Metro Technical College. The institution did, however, provide evidence that it has moved expeditiously to establish procedures that will ensure student learning outcomes for those cooperative programs that have been established and evaluated; however, the assessments have not been completed at this time. Consequently, the institution is requested to submit a further report demonstrating that the assessments have occurred for the learning outcomes for the cooperative Associate in Applied Science degree program with Coosa Valley Technical College and North Metro Technical College and that the institution has used the results of those assessments, as necessary, to enhance the quality of the program.

Please submit to your Commission staff member a **one-page** executive summary of your institution's Quality Enhancement Plan. The summary is due **August 15, 2008**, and also should include: (1) the title of your Quality Enhancement Plan, (2) your institution's name, and (3) the name, title, and email address of an individual who can be contacted regarding its development or implementation. This summary will be posted to the Commission's Web site as a resource for other institutions undergoing the reaffirmation process.

All institutions are requested to submit an "Impact Report of the Quality Enhancement Plan on Student Learning" as part of their "Fifth-Year Interim Report" due five years after their



Dr. J. Randy Pierce
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reaffirmation review. Institutions will be notified one year in advance by the President of the Commission regarding its specific due date.

Guidelines for the additional report are enclosed. Because it is essential that institutions follow these guidelines, **please make certain that those responsible for preparing the report receive the document. If they have questions about the format, contact the Commission staff member assigned to your institution.** When submitting your report, please send **four copies** to your Commission staff member.

Please note that Federal regulations and Commission policy stipulate that an institution must demonstrate compliance with all requirements and standards of the *Principles of Accreditation* within two years following the Commission's initial action on the institution. At the end of that two-year period, if the institution does not comply with all the standards and requirements of the *Principles*, representatives from the institution may be required to appear before the Commission, or one of its standing committees, to answer questions as to why the institution should not be removed from membership. If the Commission determines good cause at that time, the Commission may extend the period for coming into compliance for a minimum of six months and a maximum of two years and must place the institution on Probation. If the Commission does not determine good cause, the institution must be removed from membership. (See enclosed Commission policy "Sanctions, Denial of Reaffirmation, and Removal from Membership.")

We appreciate your continued support of the activities of the Commission on Colleges. If you have questions, please contact the Commission staff member assigned to your institution.

Sincerely,

Belle S. Wheelan, Ph.D.
President
Commission on Colleges

BSW:rlb

Enclosures

cc: Dr. David A. Carter